



State of New Hampshire

DEPARTMENT OF CORRECTIONS

P. O. Box 1806

CONCORD, NH 03302-1806

(603) 271-5600

William S. Justice

STATEMENT FORM

ON 2/18/18 AT 2135 AT SPU OFFICE
 (Date) (Time) (Place)

I BRET RICHARDSON GAVE TO _____
 (Name) (Investigator's Name)

THE FOLLOWING STATEMENT, WHICH IS THE TRUTH AND IS SIGNED UNDER THE CRIMINAL PENALTIES PROVIDED BY LAW FOR FALSE STATEMENTS.

ON THE ABOVE DATE, AT APPROXIMATELY 1630, I ENTERED
 PT. WILLIAM BOLAR'S ROOM WITH OTHER SPU SECURITY STAFF TO
 RESTRAIN AND PLACE PT IN THE STRETCHER RESTRAINT. AFTER
 THE TASER WAS DEPLOYED I SECURED PT'S LEGS AND ASSISTED WITH
 PLACEMENT OF ANKLE RESTRAINTS. I ALSO SECURED THE 2 LOWER STRAPS
 ON THE STRETCHER RESTRAINT. FDS

[Signature]